

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF OHIO
EASTERN DIVISION

In re:	§	Case No. 2:09-BK-64850-CMC
	§	
LPN Healthcare Facility Inc.	§	
	§	
	§	
Debtor(s)	§	

**CHAPTER 7 TRUSTEE'S FINAL ACCOUNT AND DISTRIBUTION REPORT
CERTIFICATION THAT THE ESTATE HAS BEEN FULLY ADMINISTERED
AND APPLICATION TO BE DISCHARGED (TDR)**

William B. Logan, chapter 7 trustee, submits this Final Account, Certification that the Estate has been Fully Administered and Application to be Discharged.

1) All funds on hand have been distributed in accordance with the Trustee's Final Report and, if applicable, any order of the Court modifying the Final Report. The case is fully administered and all assets and funds which have come under the trustee's control in this case have been properly accounted for as provided by law. The trustee hereby requests to be discharged from further duties as a trustee.

2) A summary of assets abandoned, assets exempt, total distributions to claimants, claims discharged without payment, and expenses of administration is provided below:

Assets Abandoned: <i>(without deducting any secured claims)</i>	\$2,611,835.03	Assets Exempt:	NA
Total Distributions to Claimants:	\$1,711,280.38	Claims Discharged Without Payment:	NA
Total Expenses of Administration:	\$1,112,272.89		

3) Total gross receipts of \$3,018,365.38 (see **Exhibit 1**), minus funds paid to the debtor(s) and third parties of \$194,812.11 (see **Exhibit 2**), yielded net receipts of \$2,823,553.27 from the liquidation of the property of the estate, which was distributed as follows:

	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
Secured Claims (from Exhibit 3)	\$1,625,000.00	\$1,591,627.63	\$768,385.32	\$544,758.25
Priority Claims:				
Chapter 7 Admin. Fees and Charges (from Exhibit 4)	NA	\$868,526.38	\$760,569.78	\$761,916.80
Prior Chapter Admin. Fees and Charges (from Exhibit 5)	NA	\$582,630.00	\$350,356.09	\$350,356.09
Priority Unsecured Claims (From Exhibit 6)	\$782,596.77	\$2,447,732.47	\$1,571,600.17	\$1,166,522.13
General Unsecured Claims (from Exhibit 7)	\$2,300,761.53	\$2,826,661.32	\$2,220,785.86	\$0.00
Total Disbursements	\$4,708,358.30	\$8,317,177.80	\$5,671,697.22	\$2,823,553.27

4). This case was originally filed under chapter 11 on 12/21/2009. The case was converted to one under Chapter 7 on 02/21/2012. The case was pending for 82 months.

5). All estate bank statements, deposit slips, and canceled checks have been submitted to the United States Trustee.

6). An individual estate property record and report showing the final accounting of the assets of the estate is attached as **Exhibit 8**. The cash receipts and disbursements records for each estate bank account, showing the final accounting of the receipts and disbursements of estate funds is attached as **Exhibit 9**.

Pursuant to Fed R Bank P 5009, I hereby certify, under penalty of perjury, that the foregoing report is true and correct.

Dated: 03/18/2019

By: /s/ William B. Logan
Trustee

STATEMENT: This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.

**EXHIBITS TO
FINAL ACCOUNT**

EXHIBIT 1 – GROSS RECEIPTS

DESCRIPTION	UNIFORM TRAN. CODE	AMOUNT RECEIVED
Account Receivable Purchased by Autum Health Care	1221-000	\$142,648.76
Escrow account from sale of business	1229-000	\$258,103.57
Refund of Overpayment of Chapter 11 Fees	1229-000	\$13,000.00
Refund of Prepetition Fees by Si Digman	1229-000	\$2,000.00
Bricker Settlement	1249-000	\$65,000.00
Digman Settlement (Docket #596/603)	1249-000	\$250,000.00
Opening of account	1249-000	\$164,456.30
interest	1270-000	\$0.45
interest	1270-000	\$2.14
interest	1270-000	\$11.93
interest	1270-000	\$12.49
interest	1270-000	\$13.83
interest	1270-000	\$14.27
Balance forward	1290-000	\$18.00
Balance Forward	1290-000	\$52,689.82
Balance Forward	1290-000	\$1,234,904.82
Johnson Settlement	1290-000	\$835,489.00
TOTAL GROSS RECEIPTS		\$3,018,365.38

The Uniform Transaction Code is an accounting code assigned by the trustee for statistical reporting purposes.

EXHIBIT 2 – FUNDS PAID TO DEBTOR & THIRD PARTIES

PAYEE	DESCRIPTION	UNIFORM TRAN. CODE	AMOUNT PAID
Autumn Health Care, LLC	Funds to Third Parties	8500-000	\$194,812.11
TOTAL FUNDS PAID TO DEBTOR AND THIRD PARTIES			\$194,812.11

EXHIBIT 3 – SECURED CLAIMS

CLAIM NUMBER	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
13	Ohio Bureau of Worker's Compensatio	4800-000	\$0.00	\$884.09	\$884.09	\$884.09
14	Ohio Bureau of Worker's Compensatio	4800-000	\$0.00	\$464.61	\$0.00	\$0.00

15	Ohio Bureau of Worker's Compensatio	4800-000	\$0.00	\$249.97	\$249.97	\$249.97
16	Ohio Bureau of Worker's Compensatio	4800-000	\$0.00	\$269,700.28	\$269,700.28	\$269,700.28
17	Ohio Bureau of Worker's Compensatio	4800-000	\$0.00	\$1,043.57	\$1,043.57	\$1,043.57
18	Ohio Bureau of Worker's Compensatio	4800-000	\$0.00	\$225.99	\$225.99	\$225.99
19	Ohio Bureau of Worker's Compensatio	4800-000	\$0.00	\$111,060.92	\$111,060.92	\$111,060.92
20	Ohio Bureau of Worker's Compensatio	4800-000	\$0.00	\$10,960.01	\$10,960.01	\$10,960.01
23	Ohio Bureau of Worker's Compensatio	4800-000	\$0.00	\$441.41	\$441.41	\$441.41
24	Ohio Bureau of Worker's Compensatio	4800-000	\$0.00	\$192.01	\$192.01	\$192.01
33	Peoples Bank, National Association	4110-000	\$0.00	\$822,777.70	\$0.00	\$0.00
46	Thera Trust Inc.	4220-000	\$0.00	\$50,000.00	\$50,000.00	\$50,000.00
66	Autumn Care Center Llc	4110-000	\$0.00	\$323,627.07	\$323,627.07	\$100,000.00
	Ohio Department of Job and Family	4110-000	\$900,000.00	\$0.00	\$0.00	\$0.00
	Ohio Department of Job and Family	4110-000	\$0.00	\$0.00	\$0.00	\$0.00
	Ohio Department of Job and Family	4110-000	\$0.00	\$0.00	\$0.00	\$0.00
	Peoples Bank National Association	4110-000	\$725,000.00	\$0.00	\$0.00	\$0.00
	Peoples Bank National Association	4110-000	\$0.00	\$0.00	\$0.00	\$0.00
	Peoples Bank National Association	4110-000	\$0.00	\$0.00	\$0.00	\$0.00
	Peoples Bank National Association	4110-000	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL SECURED CLAIMS			\$1,625,000.00	\$1,591,627.63	\$768,385.32	\$544,758.25

EXHIBIT 4 – CHAPTER 7 ADMINISTRATIVE FEES and CHARGES

PAYEE	UNIFORM TRAN. CODE	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
William B. Logan, Jr., Trustee	2100-000	NA	\$215,913.20	\$107,956.60	\$107,956.60
William B. Logan, Jr., Trustee	2200-000	NA	\$903.17	\$903.17	\$903.17
Insurance Partners Agency Inc.	2300-000	NA	\$3,218.71	\$3,218.71	\$3,218.71
MRSC Insurance	2300-000	NA	\$1,232.29	\$1,232.29	\$1,232.29
Bank of Kansas City	2600-000	NA	\$0.00	\$0.00	\$0.00
Park National Bank	2600-000	NA	\$18.65	\$18.65	\$18.65
United States Bankruptcy Court Cler	2700-000	NA	\$586.00	\$586.00	\$586.00
PAYX-PIA-WC Premium	2990-000	NA	\$418.06	\$418.06	\$418.06
Small Business ICPAYMENT	2990-000	NA	\$89.76	\$89.76	\$89.76
Luper Neidenthal & Logan, Attorney for Trustee	3110-000	NA	\$493,327.75	\$493,327.75	\$493,327.75
Luper Neidenthal & Logan, Attorney for Trustee	3120-000	NA	\$8,226.64	\$8,226.64	\$9,573.66
Beth Savage and GBQ Partners, Accountant for Trustee	3410-000	NA	\$97,479.00	\$97,479.00	\$97,479.00
GBQ Partner, Accountant for Trustee	3410-000	NA	\$46,913.50	\$46,913.50	\$46,913.50
Beth Savage and GBQ Partners, Accountant for Trustee	3420-000	NA	\$109.65	\$109.65	\$109.65
GBQ Partners, Accountant for Trustee	3420-000	NA	\$90.00	\$90.00	\$90.00
TOTAL CHAPTER 7 ADMIN. FEES AND CHARGES		NA	\$868,526.38	\$760,569.78	\$761,916.80

EXHIBIT 5 – PRIOR CHAPTER ADMINISTRATIVE FEES and CHARGES

PAYEE	UNIFORM TRAN. CODE	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
Alliance Rehab - SRA, Other Prior Chapter Administrative	6990-000	NA	\$27,589.17	\$27,589.17	\$27,589.17
Care Equip, Llc Db Northside Pharm e Equip, Llc Db	6990-000	NA	\$214,003.79	\$0.00	\$0.00

Northside Pharm.						
Centers For Medicare & Medicaid Ser, Other Prior Chapter Administrative	6990-000	NA	\$98,097.28	\$65,811.04	\$65,811.04	
Ohio Department Of Job And Family S, Other Prior Chapter Administrative	6990-000	NA	\$242,327.93	\$231,955.88	\$231,955.88	
Professionals Prn, Llc Dba Northsid fessionals Prn, Llc Dba Northside, Other Prior Chapter Administrative	6990-000	NA	\$611.83	\$25,000.00	\$25,000.00	
TOTAL PRIOR CHAPTER ADMIN. FEES AND CHARGES		NA	\$582,630.00	\$350,356.09	\$350,356.09	

EXHIBIT 6 – PRIORITY UNSECURED CLAIMS

CLAIM NUMBER	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
5	Internal Revenue Service	5800-000	\$350,000.00	\$1,386,201.41	\$780,231.97	\$780,231.97
9	Ohio Department Of Taxation	5800-000	\$61,266.08	\$125,853.29	\$97,860.26	\$47,768.48
12A	Ohio Department Of Taxation	5800-000	\$61,266.08	\$66,141.14	\$55,723.94	\$27,200.50
41	Ohio Department Of Job And Family S	5800-000	\$0.00	\$147,611.59	\$139,793.24	\$68,237.20
42	Ohio Bureau Of Workers Compensation	5800-000	\$310,064.61	\$127,990.33	\$127,990.33	\$62,475.86
45	Ohio Department Of Taxation	5800-000	\$0.00	\$211,312.48	\$211,312.48	\$103,147.85
54	Ohio Department Of Job And Family S	5800-000	\$0.00	\$152,435.16	\$0.00	\$0.00
55	Department Of The Treasury- IRS	5800-000	\$0.00	\$672.46	\$672.46	\$0.00
60	Ohio Department Of Taxation	5800-000	\$0.00	\$131,126.43	\$92,534.27	\$45,168.71
62	Ohio Department Of Taxation	5800-000	\$0.00	\$98,388.18	\$65,481.22	\$31,963.31
	CLERK, U.S. BANKRUPTCY COURT	5800-001	\$0.00	\$0.00	\$0.00	\$328.25
TOTAL PRIORITY UNSECURED CLAIMS			\$782,596.77	\$2,447,732.47	\$1,571,600.17	\$1,166,522.

EXHIBIT 7 – GENERAL UNSECURED CLAIMS

CLAIM NUMBER	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
1	Aicco Inc	7100-000	\$0.00	\$7,866.94	\$7,866.94	\$0.00
2	Spooner	7100-000	\$1,001.00	\$1,119.00	\$1,119.00	\$0.00
3	Quench Usa	7100-000	\$573.68	\$5,136.73	\$5,136.73	\$0.00
4	Rehab Right	7100-000	\$225.00	\$225.00	\$225.00	\$0.00
6	Medline Industries Inc	7100-000	\$14,823.42	\$12,616.57	\$12,616.57	\$0.00
7	State Industrial Products	7100-000	\$603.80	\$603.80	\$603.80	\$0.00
8	HP Products	7100-000	\$1,401.28	\$1,401.28	\$1,401.28	\$0.00
9A	Ohio Department Of Taxation	7400-000	\$61,266.08	\$125,853.29	\$27,993.03	\$0.00
10	ICP, Inc	7100-000	\$73,568.00	\$76,556.80	\$76,556.80	\$0.00
11	Mobile X Usa	7100-000	\$2,733.00	\$3,544.77	\$3,544.77	\$0.00
12	Ohio Department Of Taxation	7400-000	\$0.00	\$66,141.14	\$10,417.20	\$0.00
21	Ohio Bureau of Worker's Compensatio	7100-000	\$0.00	\$120.00	\$0.00	\$0.00
22	Ohio Bureau of Worker's Compensatio	7100-000	\$0.00	\$412.32	\$0.00	\$0.00
25	Ohio Bureau of Worker's Compensatio	7100-000	\$0.00	\$744.07	\$0.00	\$0.00
26	Ohio Bureau of Worker's Compensatio	7100-000	\$0.00	\$101.12	\$0.00	\$0.00
27	Ohio Bureau of Worker's Compensatio	7100-000	\$0.00	\$435.00	\$0.00	\$0.00
28	Ohio Bureau of Worker's Compensatio	7100-000	\$0.00	\$180.00	\$0.00	\$0.00
29	Courtesy Ambulance Inc.	7100-000	\$27.92	\$267.91	\$267.91	\$0.00
30	American Express Bank Fsb	7100-000	\$0.00	\$929.13	\$929.13	\$0.00
31	American Express Bank Fsb	7100-000	\$0.00	\$19,299.88	\$19,299.88	\$0.00
32	American Express Bank Fsb	7100-000	\$0.00	\$10,379.20	\$10,379.20	\$0.00
34	Ecolab Inc	7100-000	\$1,894.30	\$1,755.80	\$1,755.80	\$0.00

35	Protection One	7100-000	\$1,680.12	\$1,824.83	\$1,824.83	\$0.00
36	Ohio Department Of Commerce	7100-000	\$0.00	\$248.71	\$248.71	\$0.00
37	Avalon Foodservice	7100-000	\$39,744.28	\$28,178.55	\$28,178.55	\$0.00
38	Medcorp Ems South Llc	7100-000	\$3,360.00	\$9,889.64	\$9,889.64	\$0.00
39	NCS Healthcare Of Ohio	7100-000	\$0.00	\$20,776.73	\$20,776.73	\$0.00
40	Alliance Rehab - SRA	7100-000	\$291,143.54	\$413,445.94	\$413,445.94	\$0.00
41A	Ohio Department Of Job And Family S	7400-000	\$0.00	\$147,611.59	\$7,763.49	\$0.00
43	Recovery Management Systems Corpora	7100-000	\$0.00	\$241.95	\$241.95	\$0.00
44	Oce Imagistics	7100-000	\$2,673.83	\$4,027.66	\$4,027.66	\$0.00
46A	Thera Trust Inc.	7100-000	\$485,635.00	\$477,300.11	\$477,300.11	\$0.00
49	Professionals Prn, Llc Db Northsid fessionals Prn, Llc Db Northside	7100-000	\$0.00	\$5,779.29	\$5,779.29	\$0.00
50	Ohio Department Of Job And Family S	7100-000	\$0.00	\$458,053.28	\$458,053.28	\$0.00
51	Ohio Department Of Job And Family S	7100-000	\$0.00	\$44,803.51	\$44,803.51	\$0.00
52	LPN Healthcare Facility	7100-000	\$0.00	\$8,574.00	\$8,574.00	\$0.00
53	Pitney Bowes Inc	7100-000	\$714.74	\$1,103.06	\$1,103.06	\$0.00
54A	Ohio Department Of Job And Family S	7100-000	\$0.00	\$152,435.16	\$0.00	\$0.00
56	General Electric Capital Corporatio	7100-000	\$0.00	\$14,166.14	\$14,166.14	\$0.00
57	General Electric Capital Corp	7100-000	\$0.00	\$12,060.40	\$12,060.40	\$0.00
59	ICP, Inc.	7100-000	\$73,568.00	\$76,556.80	\$76,556.80	\$0.00
60A	Ohio Department Of Taxation	7400-000	\$0.00	\$131,126.43	\$38,592.16	\$0.00
62A	Ohio Department Of Taxation	7400-000	\$0.00	\$98,388.18	\$32,906.96	\$0.00
64	Ohio Department Of Job And Family S	7100-000	\$0.00	\$63,524.76	\$63,524.76	\$0.00
68	Michael Johnson	7100-000	\$370,425.58	\$320,854.85	\$320,854.85	\$0.00

Amateur Sports Promotion	7100-000	\$698.00	\$0.00	\$0.00	\$0.00
American Electric Power	7100-000	\$14,383.12	\$0.00	\$0.00	\$0.00
American Health Care Supply	7100-000	\$422.00	\$0.00	\$0.00	\$0.00
Assurant Health	7100-000	\$10,062.46	\$0.00	\$0.00	\$0.00
Big O Refuse	7100-000	\$1,048.56	\$0.00	\$0.00	\$0.00
Carmen's Distribution Systems	7100-000	\$61.80	\$0.00	\$0.00	\$0.00
Central Ohio Geriatrics	7100-000	\$3,080.00	\$0.00	\$0.00	\$0.00
Dave's Electric	7100-000	\$64.20	\$0.00	\$0.00	\$0.00
EcoLab Food Safety	7100-000	\$64.17	\$0.00	\$0.00	\$0.00
Enformix	7100-000	\$980.00	\$0.00	\$0.00	\$0.00
Gentry Fire Protection	7100-000	\$1,177.01	\$0.00	\$0.00	\$0.00
Grainger	7100-000	\$48.62	\$0.00	\$0.00	\$0.00
Gutridge Plumbing	7100-000	\$1,216.20	\$0.00	\$0.00	\$0.00
HD Supply	7100-000	\$34.22	\$0.00	\$0.00	\$0.00
Houston Plumbing & Heating Inc.	7100-000	\$457.36	\$0.00	\$0.00	\$0.00
IVANS	7100-000	\$69.12	\$0.00	\$0.00	\$0.00
Kilbourne Medical Laboratory	7100-000	\$3,772.65	\$0.00	\$0.00	\$0.00
Land & Wheels	7100-000	\$10.38	\$0.00	\$0.00	\$0.00
Local Insight Yellow Pages	7100-000	\$2,373.09	\$0.00	\$0.00	\$0.00
Luikart Heating & Plumbing	7100-000	\$112.00	\$0.00	\$0.00	\$0.00
MedaSTAT	7100-000	\$3,028.00	\$0.00	\$0.00	\$0.00
MedCorp. Education & Training	7100-000	\$405.00	\$0.00	\$0.00	\$0.00
MediMizer	7100-000	\$13.25	\$0.00	\$0.00	\$0.00
Northside Home Infusion	7100-000	\$12,730.87	\$0.00	\$0.00	\$0.00
Northside Pharmacy	7100-000	\$107,471.99	\$0.00	\$0.00	\$0.00
OFSI	7100-000	\$2,071.10	\$0.00	\$0.00	\$0.00
Ohio Department of Aging	7100-000	\$606.00	\$0.00	\$0.00	\$0.00
Ohio Health	7100-000	\$606.00	\$0.00	\$0.00	\$0.00

Consortium						
Paisley's Rental Inc.	7100-000	\$234.55	\$0.00	\$0.00	\$0.00	
Sara Johnson	7100-000	\$700,000.00	\$0.00	\$0.00	\$0.00	
Stericycle Inc.	7100-000	\$444.05	\$0.00	\$0.00	\$0.00	
Swift Maintenance Products	7100-000	\$266.80	\$0.00	\$0.00	\$0.00	
Time Warner Cable Media Sales	7100-000	\$650.00	\$0.00	\$0.00	\$0.00	
WalMart Business	7100-000	\$615.05	\$0.00	\$0.00	\$0.00	
Windstream	7100-000	\$4,421.34	\$0.00	\$0.00	\$0.00	
TOTAL GENERAL UNSECURED CLAIMS		\$2,300,761.53	\$2,826,661.32	\$2,220,785.86	\$0.00	

INDIVIDUAL ESTATE PROPERTY RECORD AND REPORT

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Exhibit 8

ASSET CASES

Case No.: 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
For the Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Date Filed (f) or Converted (c): 02/21/2012 (c)
§341(a) Meeting Date: 03/29/2012
Claims Bar Date: 06/27/2012

1	2	3	4	5	6
Asset Description (Scheduled and Unscheduled (u) Property)	Petition/ Unscheduled Value	Estimated Net Value (Value Determined by Trustee, Less Liens, Exemptions, and Other Costs)	Property Abandoned OA =§ 554(a) abandon.	Sales/Funds Received by the Estate	Asset Fully Administered (FA)/ Gross Value of Remaining Assets
Ref. #					
1	The Sum Of \$319,600 Is On Deposit In The Trust Acc	\$319,600.00	\$0.00	\$0.00	FA
2	Park National Bank Checking Account	\$2,500.00	\$2,500.00	\$0.00	FA
3	Funds Garnished Prepetition From The Debtor's Bank	\$34,833.21	\$34,833.21	\$0.00	FA
4	Medicaid Accounts Receivable	\$100,231.89	\$0.00	\$0.00	FA
5	Unbilled Medicaid Services	\$10,273.11	\$10,273.11	\$0.00	FA
6	Medicare Accounts Receivable	\$86,396.82	\$86,396.82	\$0.00	FA
7	Private Payment Accounts Receivable	\$8,000.00	\$8,000.00	\$0.00	FA
8	80 Bed Licenses	\$2,000,000.00	\$2,000,000.00	\$0.00	FA
9	Furnishings, Fixtures And Equipment	\$50,000.00	\$50,000.00	\$0.00	FA
10	Cash balance transfer from Chapter 11 to Chapter 7 (u)	\$0.00	\$1,287,612.64	\$0.00	FA
11	Interest from Park National Bank (u)	\$0.00	\$55.11	\$0.00	FA
12	Account Receivable Purchased by Autum Health Care (u)	Unknown	\$142,648.76	\$142,648.76	FA
13	Refund of Overpayment of Chapter 11 Fees (u)	Unknown	\$13,000.00	\$13,000.00	FA
14	Refund of Prepetition Fees by Si Digman (u)	Unknown	\$2,000.00	\$2,000.00	FA
15	Damages to be Assessed against Michael Johnson (u)	Unknown	\$164,456.30	\$0.00	FA
16	Digman Settlement (Docket #596/603) (u)	\$0.00	\$250,000.00	\$250,000.00	FA
17	Bricker Settlement (u)	\$0.00	\$65,000.00	\$65,000.00	FA
18	Escrow account from sale of business (u)	\$258,103.57	\$258,103.57	\$258,103.57	FA
19	Johnson Settlement (u)	\$0.00	\$1,000,000.00	\$835,489.00	FA
INT	Post-Petition Interest Deposits (u)	Unknown	Unknown	\$0.00	FA

TOTALS (Excluding unknown value)

\$2,869,938.60

\$5,374,879.52

\$1,566,241.33

Gross Value of Remaining Assets

\$0.00

INDIVIDUAL ESTATE PROPERTY RECORD AND REPORT

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Exhibit 8

ASSET CASES

Case No.: 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
For the Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Date Filed (f) or Converted (c): 02/21/2012 (c)
§341(a) Meeting Date: 03/29/2012
Claims Bar Date: 06/27/2012

1	2	3	4	5	6
Asset Description (Scheduled and Unscheduled (u) Property)	Petition/ Unscheduled Value	Estimated Net Value (Value Determined by Trustee, Less Liens, Exemptions, and Other Costs)	Property Abandoned OA =§ 554(a) abandon.	Sales/Funds Received by the Estate	Asset Fully Administered (FA)/ Gross Value of Remaining Assets

Major Activities affecting case closing:

12/20/2018 Submitted corrected TDR along with explanations for questions asked by UST. tsoma
12/06/2018 TDR was submitted on 5/14/18. There were a number of issues/corrections needed as a result of Trustee's conversion to new software after the TFR was approved. Trustee is working with UST and his software provider to resolve these issues.
05/14/2018 TDR submitted to UST for review and approval.

Initial Projected Date Of Final Report (TFR): 12/31/2014Current Projected Date Of Final Report (TFR): 05/17/2017

/s/ WILLIAM B. LOGAN, JR.

WILLIAM B. LOGAN, JR.

CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: Park National Bank
Checking Acct #: *****4717
Account Title: DDA
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
02/22/2012	(12)	Deposit	Deposit by John Ghiloni	1221-000	\$6,427.76		\$6,427.76
02/22/2012		Balance Forward	Cash balance transfer from Chapter 11 to Chapter 7	1290-000	\$52,689.82		\$59,117.58
02/24/2012		PAYX-PIA-WC Premium	Chase ACH debit made by John Ghiloni 0000015789565	2990-000		\$418.06	\$58,699.52
02/29/2012	(12)	Deposit	Deposit by John Ghiloni	1221-000	\$58,320.00		\$117,019.52
02/29/2012	(12)	Deposit	Deposit by John Ghiloni	1221-000	\$60,000.00		\$177,019.52
02/29/2012		Park National Bank	Bank Service Charge	2600-000		\$18.54	\$177,000.98
03/06/2012		Small Business ICPAYMENT	Chase ACH debit made by John Ghiloni 00450043705001	2990-000		\$89.76	\$176,911.22
06/04/2012	(12)	Licking Metropol Happmt	Deposit by John Ghiloni	1221-000	\$4,516.00		\$181,427.22
07/06/2012	(12)	Licking Metropol Happmt	Deposit by John Ghiloni	1221-000	\$4,528.00		\$185,955.22
08/02/2012	(12)	Licking Metropol Happmt	Deposit by John Ghiloni	1221-000	\$4,441.00		\$190,396.22
09/05/2012	(12)	Licking Metropol Happmt	Deposit by John Ghiloni	1221-000	\$4,416.00		\$194,812.22
10/31/2012		Park National Bank	Bank service charge	2600-000		\$0.11	\$194,812.11
11/09/2012	(12)	Licking Metropol Happmt	Reversal 11/09/12: Should have been a deposit. SUE CHAFIN	1290-000	(\$4,516.00)		\$190,296.11
11/09/2012	(12)	Licking Metropol Happmt	credit on 6/4/12	1290-000	\$4,516.00		\$194,812.11
11/09/2012	54515	Estate of LPN Healthcare Facility I	Transfer by check	9999-000		\$194,812.11	\$0.00

SUBTOTALS

\$195,338.58

\$195,338.58

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CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: Park National Bank
Checking Acct #: *****4717
Account Title: DDA
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance

TOTALS:	\$195,338.58	\$195,338.58	\$0.00
Less: Bank transfers/CDs	\$0.00	\$194,812.11	
Subtotal	\$195,338.58	\$526.47	
Less: Payments to debtors	\$0.00	\$0.00	
Net	\$195,338.58	\$526.47	

For the period of 12/21/2009 to 3/18/2019

Total Compensable Receipts:	\$195,338.58
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$195,338.58
Total Internal/Transfer Receipts:	\$0.00

Total Compensable Disbursements:	\$526.47
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$526.47
Total Internal/Transfer Disbursements:	\$194,812.11

For the entire history of the account between 05/14/2012 to 3/18/2019

Total Compensable Receipts:	\$195,338.58
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$195,338.58
Total Internal/Transfer Receipts:	\$0.00

Total Compensable Disbursements:	\$526.47
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$526.47
Total Internal/Transfer Disbursements:	\$194,812.11

CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: Park National Bank
Checking Acct #: *****7468
Account Title: DDA
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4	5	6	7	
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
02/29/2012		Balance Forward	Cash balance transfer from Chapter 11 to Chapter 7	1290-000	\$1,234,904.82		\$1,234,904.82
04/06/2012	(13)	US Trustee	Refund of Overpayment of Chapter 11 Fees	1229-000	\$13,000.00		\$1,247,904.82
05/31/2012	(19)	Thera Trust Inc.	Per court order Reversal 11/09/12: Should have been a check, not a deposit. SUE CHAFIN	1290-000	(\$50,000.00)		\$1,197,904.82
05/31/2012	(19)	Thera Trust Inc.	Per court order	1290-000	\$50,000.00		\$1,247,904.82
05/31/2012	54402	Thera Trust Inc.	Per court order, docket 424 Payable to Thera Trust Inc.	4220-000		\$50,000.00	\$1,197,904.82
08/03/2012	(14)	deposit	Refund from Si Digman, pre-petition fees received 1/2010	1229-000	\$2,000.00		\$1,199,904.82
09/18/2012	54533	GBQ Partner	Per court order	3410-000		\$10,000.00	\$1,189,904.82
11/09/2012	54515	Estate of LPN Healthcare Facility I	Transfer by check	9999-000		\$1,189,904.82	\$0.00

TOTALS:	\$1,249,904.82	\$1,249,904.82	\$0.00
Less: Bank transfers/CDs	\$0.00	\$1,189,904.82	
Subtotal	\$1,249,904.82	\$60,000.00	
Less: Payments to debtors	\$0.00	\$0.00	
Net	\$1,249,904.82	\$60,000.00	

For the period of 12/21/2009 to 3/18/2019

Total Compensable Receipts:	\$1,249,904.82
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$1,249,904.82
Total Internal/Transfer Receipts:	\$0.00

Total Compensable Disbursements:	\$60,000.00
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$60,000.00
Total Internal/Transfer Disbursements:	\$1,189,904.82

For the entire history of the account between 05/14/2012 to 3/18/2019

Total Compensable Receipts:	\$1,249,904.82
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$1,249,904.82
Total Internal/Transfer Receipts:	\$0.00

Total Compensable Disbursements:	\$60,000.00
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$60,000.00
Total Internal/Transfer Disbursements:	\$1,189,904.82

CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: BOK Financial
Checking Acct #: *****0128
Account Title: General Account
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
11/09/2012		Estate of LPN Healthcare Facility I	Transfer by deposit (Park National Bank check no. 05451535)	9999-000	\$18.00		\$18.00
11/09/2012		Estate of LPN Healthcare Facility I	Transfer by deposit (Park National Bank check no. 05451536)	9999-000	\$1,189,904.82		\$1,189,922.82
12/14/2012		Bank of Kansas City	Bank Service Fee under 11 U.S.C. § 330(a)(1)(B), 503(b)(1), and 507(a)(2)	2600-000		\$790.03	\$1,189,132.79
12/19/2012	1001	MRSC Insurance	Invoice No. 86619	2300-000		\$1,232.29	\$1,187,900.50
01/16/2013		Bank of Kansas City	Bank Service Fee under 11 U.S.C. § 330(a)(1)(B), 503(b)(1), and 507(a)(2)	2600-000		\$1,360.08	\$1,186,540.42
04/30/2013	1002	Luper Neidenthal & Logan	4/26/13 Order (Doc. 544)	3110-000		\$138,928.50	\$1,047,611.92
04/30/2013	1003	Luper Neidenthal & Logan	4/26/13 Order (Doc. 544)	3120-000		\$2,776.42	\$1,044,835.50
04/30/2013	1004	Beth Savage and GBQ Partners	4/26/13 Order (Doc. 545)	3410-000		\$69,174.50	\$975,661.00
04/30/2013	1005	Beth Savage and GBQ Partners	4/26/13 Order (Doc. 545)	3420-000		\$56.00	\$975,605.00
05/01/2013		Bank of Kansas City	Bank Service Charge Refund refund of 12/14/12 bank service charges	2600-000		(\$790.03)	\$976,395.03
05/01/2013		Bank of Kansas City	Bank Service Charge Refund Refund of 1/16/13 bank service charge	2600-000		(\$1,360.08)	\$977,755.11
08/21/2013	1006	Luper Neidenthal & Logan	Per 8/20/13 court order	3110-000		\$81,469.50	\$896,285.61
08/21/2013	1007	Luper Neidenthal & Logan	Per 8/20/13 court order	3120-000		\$1,215.17	\$895,070.44
08/21/2013	1008	Beth Savage and GBQ Partners	Per 8/20/13 court order	3410-000		\$28,304.50	\$866,765.94
08/21/2013	1009	Beth Savage and GBQ Partners	Per 8/20/13 court order	3420-000		\$53.65	\$866,712.29
12/13/2013	1010	Insurance Partners Agency Inc.	2013-2014 Bond	2300-000		\$1,068.49	\$865,643.80
03/11/2014	1011	Luper Neidenthal & Logan	Order, Doc. 605	3110-000		\$110,048.00	\$755,595.80
03/11/2014	1012	Luper Neidenthal & Logan	Order, Doc. 605	3120-000		\$3,741.01	\$751,854.79
03/11/2014	1013	GBQ Partners	Order, Doc. 604	3410-000		\$21,891.00	\$729,963.79
03/11/2014	1014	GBQ Partners	Order, Doc. 604	3420-000		\$90.00	\$729,873.79
04/16/2014	(16)	CNA	Settlement Claim	1249-000	\$250,000.00		\$979,873.79
08/20/2014	1015	GBQ Partners	Order, Doc. 631	3410-000		\$15,022.50	\$964,851.29
08/25/2014	(17)	Bricker & Eckler	Settlement Claim	1249-000	\$65,000.00		\$1,029,851.29

SUBTOTALS

\$1,504,922.82

\$475,071.53

CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: BOK Financial
Checking Acct #: *****0128
Account Title: General Account
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
09/16/2014	1016	Luper Neidenthal & Logan	September 16, 2014 Court Order, Docket 640	3110-000		\$49,960.50	\$979,890.79
09/16/2014	1017	William B. Logan Jr.	September 16, 2014 Court Order, Docket 640	3120-000		\$17.00	\$979,873.79
12/16/2014	1018	Insurance Partners Agency Inc.	2014-2015 Bond	2300-000		\$1,021.92	\$978,851.87
02/12/2015	(18)	LPN Health Care Facility	Escrow Split	1229-000	\$258,103.57		\$1,236,955.44
04/08/2015	1019	Luper Neidenthal & Logan	Per 4/8/15 Court Order, Docket #654	3110-000		\$31,257.50	\$1,205,697.94
04/08/2015	1020	Luper Neidenthal & Logan	Per 4/8/15 Court Order, Docket #654	3120-000		\$1,347.02	\$1,204,350.92
07/14/2015	(19)	Reese Pyle & Meyer	Johnson Settlement	1249-000	\$635,489.00		\$1,839,839.92
07/14/2015	1021	Internal Revenue Service	Claim #5 Settlement	5800-000		\$780,231.97	\$1,059,607.95
08/20/2015	(19)	Stimson House Title Inc	Johnson Settlement	1249-000	\$22,194.06		\$1,081,802.01
09/14/2015	1022	Luper Neidenthal & Logan	September 1, 2015 Court Order, Docket 678	3110-000		\$53,253.75	\$1,028,548.26
09/14/2015	1023	William B. Logan, Jr.	September 1, 2015 Court Order, Docket 678	3120-000		\$477.04	\$1,028,071.22
09/23/2015	(19)	Stimpson House Title, Inc.	Johnson Settlement	1249-000	\$177,805.94		\$1,205,877.16
09/24/2015		Transfer from Acct # xxxxxx0139	Transfer of Funds - Johnson Settlement Funds	9999-000	\$164,511.41		\$1,370,388.57
09/25/2015	1024	Autumn Care Center Llc	Settlement on Claim # 66	4110-000		\$100,000.00	\$1,270,388.57
12/18/2015	1025	Insurance Partners Agency Inc.	Invoice #222138	2300-000		\$1,128.30	\$1,269,260.27
09/06/2017	1026	William B. Logan, Jr.	Final distribution representing a payment of 100.00 % per court order.	2100-000		\$107,956.60	\$1,161,303.67
09/06/2017	1027	William B. Logan, Jr.	Final distribution representing a payment of 100.00 % per court order.	2200-000		\$903.17	\$1,160,400.50
09/06/2017	1028	United States Bankruptcy Court Cler	Adv. Pro. 12-02471 & Adv. Pro 13-2047	2700-000		\$586.00	\$1,159,814.50
09/06/2017	1029	Luper Neidenthal & Logan	Final distribution representing a payment of 6.15 % per court order.	3110-000		\$28,410.00	\$1,131,404.50
09/06/2017	1030	Ohio Bureau of Worker's Compensatio	Final distribution to claim 13 representing a payment of 100.00 % per court order.	4800-000		\$884.09	\$1,130,520.41
09/06/2017	1031	Ohio Bureau of Worker's Compensatio	Final distribution to claim 15 representing a payment of 100.00 % per court order.	4800-000		\$249.97	\$1,130,270.44
09/06/2017	1032	Ohio Bureau of Worker's Compensatio	Final distribution to claim 16 representing a payment of 100.00 % per court order.	4800-000		\$269,700.28	\$860,570.16

SUBTOTALS \$1,258,103.98 \$1,427,385.11

CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: BOK Financial
Checking Acct #: *****0128
Account Title: General Account
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
09/06/2017	1033	Ohio Bureau of Worker's Compensatio	Final distribution to claim 17 representing a payment of 100.00 % per court order.	4800-000		\$1,043.57	\$859,526.59
09/06/2017	1034	Ohio Bureau of Worker's Compensatio	Final distribution to claim 18 representing a payment of 100.00 % per court order.	4800-000		\$225.99	\$859,300.60
09/06/2017	1035	Ohio Bureau of Worker's Compensatio	Final distribution to claim 19 representing a payment of 100.00 % per court order.	4800-000		\$111,060.92	\$748,239.68
09/06/2017	1036	Ohio Bureau of Worker's Compensatio	Final distribution to claim 20 representing a payment of 100.00 % per court order.	4800-000		\$10,960.01	\$737,279.67
09/06/2017	1037	Ohio Bureau of Worker's Compensatio	Final distribution to claim 23 representing a payment of 100.00 % per court order.	4800-000		\$441.41	\$736,838.26
09/06/2017	1038	Ohio Bureau of Worker's Compensatio	Final distribution to claim 24 representing a payment of 100.00 % per court order.	4800-000		\$192.01	\$736,646.25
09/06/2017	1039	Professionals Prn, Llc Db Northsid	Final distribution to claim 47 representing a payment of 100.00 % per court order.	6990-000		\$25,000.00	\$711,646.25
09/06/2017	1040	Ohio Department Of Job And Family S	Final distribution to claim 58 representing a payment of 100.00 % per court order.	6990-000		\$24,664.41	\$686,981.84
09/06/2017	1041	Centers For Medicare & Medicaid Ser	Final distribution to claim 61 representing a payment of 100.00 % per court order.	6990-000		\$65,811.04	\$621,170.80
09/06/2017	1042	Ohio Department Of Job And Family S	Final distribution to claim 63 representing a payment of 100.00 % per court order.	6990-000		\$207,291.47	\$413,879.33
09/06/2017	1043	Alliance Rehab - SRA	Final distribution to claim 65 representing a payment of 100.00 % per court order.	6990-000		\$27,589.17	\$386,290.16
09/06/2017	1044	Ohio Department Of Taxation	Final distribution to claim 9 representing a payment of 48.81 % per court order.	5800-000		\$47,768.48	\$338,521.68
09/06/2017	1045	Ohio Department Of Taxation	Final distribution to claim 12 representing a payment of 48.81 % per court order.	5800-000		\$27,200.50	\$311,321.18
09/06/2017	1046	Ohio Department Of Job And Family S	Final distribution to claim 41 representing a payment of 48.81 % per court order.	5800-000		\$68,237.20	\$243,083.98
09/06/2017	1047	Ohio Bureau Of Workers Compensation	Final distribution to claim 42 representing a payment of 48.81 % per court order.	5800-000		\$62,475.86	\$180,608.12

SUBTOTALS

\$0.00

\$679,962.04

CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: BOK Financial
Checking Acct #: *****0128
Account Title: General Account
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
09/06/2017	1048	Ohio Department Of Taxation	Final distribution to claim 45 representing a payment of 48.81 % per court order.	5800-000		\$103,147.85	\$77,460.27
09/06/2017	1049	Department Of The Treasury- IRS	Final distribution to claim 55 representing a payment of 48.81 % per court order.	5800-000		\$328.25	\$77,132.02
09/06/2017	1050	Ohio Department Of Taxation	Final distribution to claim 60 representing a payment of 48.81 % per court order.	5800-000		\$45,168.71	\$31,963.31
09/06/2017	1051	Ohio Department Of Taxation	Final distribution to claim 62 representing a payment of 48.81 % per court order.	5800-000		\$31,963.31	\$0.00
12/30/2017	1049	STOP PAYMENT: Department Of The Treasury- IRS	Final distribution to claim 55 representing a payment of 48.81 % per court order.	5800-004		(\$328.25)	\$328.25
12/30/2017	1052	Integrity Bank	Wire out of Funds	9999-000		\$328.25	\$0.00

TOTALS:	\$2,763,026.80	\$2,763,026.80	\$0.00
Less: Bank transfers/CDs	\$1,354,434.23	\$328.25	
Subtotal	\$1,408,592.57	\$2,762,698.55	
Less: Payments to debtors	\$0.00	\$0.00	
Net	\$1,408,592.57	\$2,762,698.55	

For the period of 12/21/2009 to 3/18/2019

Total Compensable Receipts:	\$1,408,592.57
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$1,408,592.57
Total Internal/Transfer Receipts:	\$1,354,434.23

Total Compensable Disbursements:	\$2,762,698.55
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$2,762,698.55
Total Internal/Transfer Disbursements:	\$328.25

For the entire history of the account between 11/07/2012 to 3/18/2019

Total Compensable Receipts:	\$1,408,592.57
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$1,408,592.57
Total Internal/Transfer Receipts:	\$1,354,434.23

Total Compensable Disbursements:	\$2,762,698.55
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$2,762,698.55
Total Internal/Transfer Disbursements:	\$328.25

CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: BOK Financial
Checking Acct #: *****0139
Account Title: Johnson Account
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
11/09/2012		Estate of LPN Healthcare Facility I	Transfer by deposit (Park National Bank check no. 05451534)	9999-000	\$164,511.41		\$164,511.41
12/14/2012		Bank of Kansas City	Bank Service Fee under 11 U.S.C. § 330(a)(1)(B), 503(b)(1), and 507(a)(2)	2600-000		\$109.23	\$164,402.18
01/16/2013		Bank of Kansas City	Bank Service Fee under 11 U.S.C. § 330(a)(1)(B), 503(b)(1), and 507(a)(2)	2600-000		\$188.04	\$164,214.14
05/01/2013		Bank of Kansas City	Bank Service Charge Refund Refund of 12/14/12 bank service charge	2600-000		(\$109.23)	\$164,323.37
05/01/2013		Bank of Kansas City	Bank Service Charge Refund Refund of 1/16/13 bank service charge	2600-000		(\$188.04)	\$164,511.41
09/24/2015		Transfer to Acct # xxxxxx0128	Transfer of Funds - Johnson Settlement Funds	9999-000		\$164,511.41	\$0.00

TOTALS:	\$164,511.41	\$164,511.41	\$0.00
Less: Bank transfers/CDs	\$164,511.41	\$164,511.41	
Subtotal	\$0.00	\$0.00	
Less: Payments to debtors	\$0.00	\$0.00	
Net	\$0.00	\$0.00	

For the period of 12/21/2009 to 3/18/2019

Total Compensable Receipts:	\$0.00
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$0.00
Total Internal/Transfer Receipts:	\$164,511.41

Total Compensable Disbursements:	\$0.00
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$0.00
Total Internal/Transfer Disbursements:	\$164,511.41

For the entire history of the account between 11/07/2012 to 3/18/2019

Total Compensable Receipts:	\$0.00
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$0.00
Total Internal/Transfer Receipts:	\$164,511.41

Total Compensable Disbursements:	\$0.00
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$0.00
Total Internal/Transfer Disbursements:	\$164,511.41

CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: BOK Financial
Checking Acct #: *****0150
Account Title: Special Trust Account
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
11/09/2012		Estate of LPN Healthcare Facility I	Transfer by deposit (Park National Bank check no. 05451537)	9999-000	\$194,812.11		\$194,812.11
12/14/2012		Bank of Kansas City	Bank Service Fee under 11 U.S.C. § 330(a)(1)(B), 503(b) (1), and 507(a)(2)	2600-000		\$129.34	\$194,682.77
01/16/2013		Bank of Kansas City	Bank Service Fee under 11 U.S.C. § 330(a)(1)(B), 503(b) (1), and 507(a)(2)	2600-000		\$222.67	\$194,460.10
05/01/2013		Bank of Kansas City	Bank Service Charge Refund Refund of 12/14/12 bank service charge	2600-000		(\$129.34)	\$194,589.44
05/01/2013		Bank of Kansas City	Bank Service Charge Refund Refund of 1/16/13 bank service charge	2600-000		(\$222.67)	\$194,812.11
10/23/2013	3001	Autumn Health Care, LLC	9/25/13 Court Order, Doc 582	8500-000		\$194,812.11	\$0.00

TOTALS:

\$194,812.11

\$194,812.11

\$0.00

Less: Bank transfers/CDs

\$194,812.11

\$0.00

Subtotal

\$0.00

\$194,812.11

Less: Payments to debtors

\$0.00

\$0.00

Net

\$0.00

\$194,812.11

For the period of 12/21/2009 to 3/18/2019

Total Compensable Receipts: \$0.00
Total Non-Compensable Receipts: \$0.00
Total Comp/Non Comp Receipts: \$0.00
Total Internal/Transfer Receipts: \$194,812.11

Total Compensable Disbursements: \$194,812.11
Total Non-Compensable Disbursements: \$0.00
Total Comp/Non Comp Disbursements: \$194,812.11
Total Internal/Transfer Disbursements: \$0.00

For the entire history of the account between 11/07/2012 to 3/18/2019

Total Compensable Receipts: \$0.00
Total Non-Compensable Receipts: \$0.00
Total Comp/Non Comp Receipts: \$0.00
Total Internal/Transfer Receipts: \$194,812.11

Total Compensable Disbursements: \$194,812.11
Total Non-Compensable Disbursements: \$0.00
Total Comp/Non Comp Disbursements: \$194,812.11
Total Internal/Transfer Disbursements: \$0.00

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CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: Park National Bank
Checking Acct #: *****son)
Account Title: DDA
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
06/28/2012		Opening of account	Damages to be assessed against Michael Johnson Credit on 6/28/12	1249-000	\$164,456.30		\$164,456.30
06/29/2012		interest	interest	1270-000	\$0.45		\$164,456.75
07/31/2012		interest	interest	1270-000	\$14.27		\$164,471.02
08/31/2012		interest	interest	1270-000	\$13.83		\$164,484.85
09/28/2012		interest	interest	1270-000	\$12.49		\$164,497.34
10/31/2012		interest	interest	1270-000	\$11.93		\$164,509.27
11/08/2012		interest	interest	1270-000	\$2.14		\$164,511.41
11/09/2012	54515	Estate of LPN Healthcare Facility I	Transfer by check	9999-000		\$164,511.41	\$0.00

TOTALS:	\$164,511.41	\$164,511.41	\$0.00
Less: Bank transfers/CDs	\$0.00	\$164,511.41	
Subtotal	\$164,511.41	\$0.00	
Less: Payments to debtors	\$0.00	\$0.00	
Net	\$164,511.41	\$0.00	

For the period of 12/21/2009 to 3/18/2019

Total Compensable Receipts:	\$164,511.41
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$164,511.41
Total Internal/Transfer Receipts:	\$0.00

Total Compensable Disbursements:	\$0.00
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$0.00
Total Internal/Transfer Disbursements:	\$164,511.41

For the entire history of the account between 11/09/2012 to 3/18/2019

Total Compensable Receipts:	\$164,511.41
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$164,511.41
Total Internal/Transfer Receipts:	\$0.00

Total Compensable Disbursements:	\$0.00
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$0.00
Total Internal/Transfer Disbursements:	\$164,511.41

CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: Independent Bank
Checking Acct #: *****4850
Account Title:
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
12/31/2017		BOK Financial	Wire in of Funds	9999-000	\$328.25		\$328.25
01/08/2018	3001	CLERK, U.S. BANKRUPTCY COURT	Unclaimed funds	5800-001		\$328.25	\$0.00

TOTALS:	\$328.25	\$328.25	\$0.00
Less: Bank transfers/CDs	\$328.25	\$0.00	
Subtotal	\$0.00	\$328.25	
Less: Payments to debtors	\$0.00	\$0.00	
Net	\$0.00	\$328.25	

For the period of 12/21/2009 to 3/18/2019

Total Compensable Receipts:	\$0.00
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$0.00
Total Internal/Transfer Receipts:	\$328.25

Total Compensable Disbursements:	\$328.25
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$328.25
Total Internal/Transfer Disbursements:	\$0.00

For the entire history of the account between 12/28/2017 to 3/18/2019

Total Compensable Receipts:	\$0.00
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$0.00
Total Internal/Transfer Receipts:	\$328.25

Total Compensable Disbursements:	\$328.25
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$328.25
Total Internal/Transfer Disbursements:	\$0.00

CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: Park National Bank
Checking Acct #: *****ral)
Account Title: DDA
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
02/29/2012		Balance forward	Cash balance transfer from Chapter 11 to Chapter 7	1290-000	\$18.00		\$18.00
11/09/2012	54515	Estate of LPN Healthcare Facility I	Transfer by check	9999-000		\$18.00	\$0.00

TOTALS:	\$18.00	\$18.00	\$0.00
Less: Bank transfers/CDs	\$0.00	\$18.00	
Subtotal	\$18.00	\$0.00	
Less: Payments to debtors	\$0.00	\$0.00	
Net	\$18.00	\$0.00	

For the period of 12/21/2009 to 3/18/2019

Total Compensable Receipts:	\$18.00
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$18.00
Total Internal/Transfer Receipts:	\$0.00

Total Compensable Disbursements:	\$0.00
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$0.00
Total Internal/Transfer Disbursements:	\$18.00

For the entire history of the account between 11/09/2012 to 3/18/2019

Total Compensable Receipts:	\$18.00
Total Non-Compensable Receipts:	\$0.00
Total Comp/Non Comp Receipts:	\$18.00
Total Internal/Transfer Receipts:	\$0.00

Total Compensable Disbursements:	\$0.00
Total Non-Compensable Disbursements:	\$0.00
Total Comp/Non Comp Disbursements:	\$0.00
Total Internal/Transfer Disbursements:	\$18.00

CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 09-64850-CMC
Case Name: LPN Healthcare Facility Inc.
Primary Taxpayer ID #: **_***4713
Co-Debtor Taxpayer ID #:
For Period Beginning: 12/21/2009
For Period Ending: 3/18/2019

Trustee Name: William B. Logan, Jr.
Bank Name: Park National Bank
Checking Acct #: *****ral)
Account Title: DDA
Blanket bond (per case limit): \$2,000,000.00
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance

TOTAL - ALL ACCOUNTS

NET DEPOSITS

NET DISBURSE

ACCOUNT BALANCES

\$3,018,365.38

\$3,018,365.38

\$0.00

For the period of 12/21/2009 to 3/18/2019

Total Compensable Receipts: \$3,018,365.38
Total Non-Compensable Receipts: \$0.00
Total Comp/Non Comp Receipts: \$3,018,365.38
Total Internal/Transfer Receipts: \$1,714,086.00

Total Compensable Disbursements: \$3,018,365.38
Total Non-Compensable Disbursements: \$0.00
Total Comp/Non Comp Disbursements: \$3,018,365.38
Total Internal/Transfer Disbursements: \$1,714,086.00

For the entire history of the case between 02/21/2012 to 3/18/2019

Total Compensable Receipts: \$3,018,365.38
Total Non-Compensable Receipts: \$0.00
Total Comp/Non Comp Receipts: \$3,018,365.38
Total Internal/Transfer Receipts: \$1,714,086.00

Total Compensable Disbursements: \$3,018,365.38
Total Non-Compensable Disbursements: \$0.00
Total Comp/Non Comp Disbursements: \$3,018,365.38
Total Internal/Transfer Disbursements: \$1,714,086.00

/s/ WILLIAM B. LOGAN, JR.

WILLIAM B. LOGAN, JR.